PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail

Mail Stop ISSUE FEE
Commissioner for Patents
P.O. Box 1450
Alexandria, Virginia 22313-1450

or Fax (571)-273-2885

INSTRUCTIONS: Thi appropriate. All further indicated unless correct maintenance fee notific	tea below or alrected of	for transmitting the ISS ing the Patent, advance of therwise in Block 1, by	SUE FEE and PUBLICAT orders and notification of (a) specifying a new corre	TON FEE (if requestion requestion of the contract of the contr	ired). will be ; and/o	Blocks 1 through 5 s mailed to the current or (b) indicating a sep	should be completed where correspondence address a arate "FEE ADDRESS" fo	
CURRENT CORRESPONI	Fee	Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.						
33308	пач	Certificate of Mailing or Transmission I hereby certify that this Fee(s) Transmittal is being deposited with the United						
LOWE HAUF	I he							
1700 DIAGONAL ROAD, SUITE 300 ALEXANDRIA, VA 22314				States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.				
							(Depositor's name)	
							(Signature)	
							(Date)	
APPLICATION NO.	APPLICATION NO. FILING DATE		FIRST NAMED INVENTOR		ATTORNEY DOCKET NO. CONFIRMATION NO.			
10/576,360	04/19/2006	Philippe Jean Billaud	ilippe Jean Billaud 4590-516 2183					
TITLE OF INVENTION RESPONSE RECEIVED	I: METHOD AND DEV DBY A SECONDARY I	ICE FOR DETERMININ RADAR	IG A REFERENCE VALU	E OF A RESPONS	SE, IN	PARTICULAR OF A	MODE S	
APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUI	E FEE	TOTAL FEE(S) DUE	DATE DUE	
nonprovisional	NO	\$1440	\$300	\$0		\$1740	07/18/2008	
EXAMINER		ART UNIT	CLASS-SUBCLASS					
ALSOMIRI, ISAM A 3662			342-037000					
 Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required. 			(1) the names of up to or agents OR, alternativ (2) the name of a single registered attorney or a 2 registered patent attor	2. For printing on the patent front page, list 1) the names of up to 3 registered patent attorneys or agents OR, alternatively, 2) the name of a single firm (having as a member a egistered attorney or agent) and the names of up to registered patent attorneys or agents. If no name is sted, no name will be printed.				
3. ASSIGNEE NAME A	ND RESIDENCE DATA	TO BE PRINTED ON	L	ne)				
					ee is id	entified below, the do	ocument has been filed for	
(A) NAME OF ASSIC		(B) RESIDENCE: (CITY and STATE OR COUNTRY)						
Thales France								
Please check the appropri	ate assignee category or	categories (will not be pr	inted on the patent):	Individual 🖫 Co.	rporatio	on or other private gro	up entity Government	
4a. The following fee(s) are submitted: 4b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above) A check is enclosed.								
Publication Fee (No small entity discount permitted) Payment by credit card. Form PTO-2038 is attached.								
Advance Order - #	of Copies		The Director is hereby overpayment, to Depos	authorized to charge it Account Number	e pe r	equired fee(s), any def (enclose an	iciency, or credit any extra copy of this form).	
 Change in Entity Stat a. Applicant claims 	us (from status indicated SMALL ENTITY status	,	☐ b. Applicant is no long					
NOTE: The Issue Fee and interest as shown by the re	Publication Fee (if requeecords of the United State	ired) will not be accepted	from anyone other than th	e applicant; a regis	tered a	ttorney or agent; or the	e assignee or other party in	
Authorized Signature	Kenneth	M. Berner	Office.	Date 7	12/0	98		
Typed or printed name	Kenneth M.	Berner		Registration No	o3	7,093		
This collection of informa an application. Confidenti submitting the completed this form and/or suggestic	tion is required by 37 Cl ality is governed by 35 I application form to the	FR 1.311. The information U.S.C. 122 and 37 CFR 1 USPTO. Time will vary	n is required to obtain or re 1.14. This collection is esti- depending upon the indivi	tain a benefit by th mated to take 12 m dual case. Any con	e publicinutes	c which is to file (and to complete, including on the amount of tim	by the USPTO to process) gathering, preparing, and e you require to complete	

unis iorin and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.